

**THIS DECISION HAS BEEN APPEALED. THE
FOLLOWING IS THE RELATED SOAH DECISION NUMBER:**

SOAH DOCKET NO. 453-04-3734.M4

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective June 17, 2001 and Commission Rule 133.305, titled Medical Dispute Resolution-General, and 133.307, titled Medical Dispute Resolution of a Medical Fee Dispute, a review was conducted by the Division regarding a medical fee dispute between the requestor and the respondent named above. This dispute was received on 06/13/03.

I. DISPUTE

Whether there should be reimbursement for Prescriptions for the dates of service 02/05/02 through 01/28/03.

II. RATIONALE

Unable to contact the injured worker at home, there was no answer for the date of 01/28/04. Contacted the Insurance Carrier on 01/28/04 and reached a ____, she stated there wasn't anything in the system that showed the injured worker had submitted any bills.

According to rule 133.307(f)(3), the requestor shall submit convincing evidence that the carrier received the requestor's request for reimbursement.

The case file does not contain any evidence of a submission of medical bills to the respondent. Therefore, based solely on this evidence reimbursement is not recommended.

III. FINDINGS & DECISION

The above Findings and Decision are hereby issued this 28th day of January 2004.

Michael Bucklin
Medical Dispute Resolution Officer
Medical Review Division

MB/mb